

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/11/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER 1-555-555-5	555	CONTACT NAME:	Jane Dow			
Joe Bloe, Acme Risk Management, Inc. 300 S. Somewhere, Suite 1900	nc.		555-555-1234	FAX (A/C, No):		
		E MAII	jane.dow@jjj.com			
Nowhere, IL 60606			INSURER(S) AFFORDING COVERAGE		NAIC#	
		INSURER A:	LEXINGTON INS CO		19437	
INSURED		INSURER B :	TRAVELERS IND CO OF CT		25682	
Some University Treasury and Risk Management Services		INSURER C :				
0900 Anywhere Avenue		INSURER D :				
Noplace, OH 44199						
Nopiace, on 44199						

COVERAGES CERTIFICATE NUMBER: 29024738 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID AND MIS.							
NSR LTR	R TYPE OF INSURANCE		R D POLICY NUMBER	POLICY EFF F 4CY EX (MM/DD/YYYY) (/ //DD/YY 1	LIMITS		
Α	GENERAL LIABILITY		37205394	11, 1/11 1/0 /12	ACH OCCURRENCE	\$ (1,000,000)	
	X COMMERCIAL GENERAL LIABILITY				AMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
	CLAIMS-MADE X OCCUR				MED EXP (Any one person)	\$	
					PERSONAL & ADV INJURY	\$1,000,000	
					GENERAL AGGREGATE	\$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$ 2,000,000	
В	X POLICY PRO- JECT LOC		Y 810 9962B386 ?_'CT-1	1 11/ 11 11/01/12	COMBINED SINGLE LIMIT	\$	
ь	AUTOMOBILE LIABILITY		1 610 9902B380 E-1-1	1 11/01/12	(Ea accident)	\$ <mark>1,000,000</mark>	
	X ANY AUTO				BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$	
	X HIRED AUTOS X NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident)	\$	
						\$	
	UMBRELLA LIAB OCCUR				EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADI		~		AGGREGATE	\$	
	DED RETENTION\$					\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- OTH- TORY LIMITS ER		
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$	
	(Mandatory in NH)	N/A			E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below				E.L. DISEASE - POLICY LIMIT	\$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

The Board of Park Commissioners of the Cleveland Metropolitan Park District is named as an additional insured with

respect to the operations of the named insured per the permit held by the insured.



CERTIFICA	IE HOLDER	CANCELLATION
Board of Park Commissioners of the Cleveland Metropolitan Park District Attn: Patrick D. Lorch, Ph.D.		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
2277 West	Ridgewood Drive	AUTHORIZED REPRESENTATIVE John Hancock goes here
Parma, OH	44134	John Hancock goes here
	USA	